



KEY POINT SUMMARY

OBJECTIVES

The objective of the study was to explore the effect of the physical environment at the three facilities representing the different steps of acute care, to document the perception of the patients-carers and the staff regarding their needs.

Does the Design of Settings Where Acute Care Is Delivered Meet the Needs of Older People? Perspectives of Patients, Family Carers, and Staff

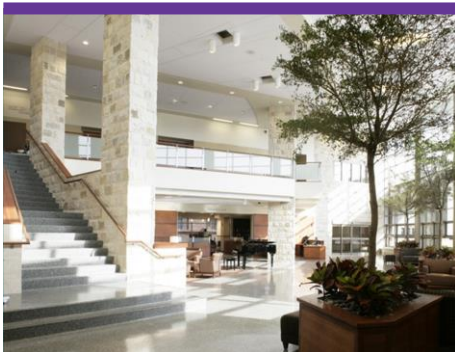
Haywood, A., Barnes, S., Marsh, H., Parker, S. G., 2018 | *HERD: Health Environments Research & Design Journal*. Volume 11, Issue 2, Pages 177-188

Key Concepts/Context

Acute care for older patients has special requirements but is seldom addressed in relation to the architecture of the facility. Improving the physical environment could result in better health outcomes for a growing number of patients. This study examines the impact of design at three different acute care facilities: 1- An elderly care ward of a midsized National Health Service (NHS) Foundation Trust hospital; 2- An inpatient community rehabilitation hospital (RH); 3- A nursing home with beds dedicated to intermediate care (ICP).

Methods

Interviews were conducted with a total of 40 patient-carer pairs and three focus groups made up of staff at each of the three selected facilities. Among the carers were spouses, partners, daughters, sons, daughters-in-law, and friends. After the participants were chosen, the interviews took place following discharge at their homes which invoked memories of the last facility experienced. A design for a loose interview guide was developed to be used by the interviewers. The focus was on the physical environment and how it affected the patient and carer needs and the staff's ability to perform their duties. There were 19 staff participants in the three focus groups who consisted of several disciplines both clinical and non-clinical. The interviews took place at their facilities to initiate a discussion on the physical environment and its positive and negative aspects concerning their jobs. The



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interviews were recorded and later transcribed verbatim into anonymous transcripts. The data analysis ensued using the following grouped themes:

- 1- Accessibility to the site
- 2- Privacy and dignity
- 3- Homelike environment
- 4- Personal space/storage
- 5- Awareness of the outside world
- 6- Cleanliness and hygiene
- 7- Quality and accessibility of the facilities
- 8- Safety and security

Findings

The data analysis results were presented based on the eight themes selected for the interviews. Access to the facilities was important and was raised at the three locations. The RH was at a rural location that made it difficult to access. The ICP was close to public transportation but was not in a safe area, which was intimidating. Furthermore, the AHS parking was not sufficient, causing time delays and frustration. The analysis indicated that the patients preferred being in a bay instead of a single room, for better interaction with others. The physical environment at the RH and ICP had homelike interior design which was praised by the participants. Despite the homelike design the care home residents had little chance to lead private daily lives. There was also a major concern about the lack of storage space for personal items, especially at the AHS. Access to the outdoors and visual connections were discussed by all the participants, who maintained that they were desirable. A preceding wider study found that the three sites were rated high regarding good hygiene but the participants had mixed reviews. Carers complained about security access problems during visiting hours, and ironically theft cases of personal items were reported. Staff commented on the building design and stressed that there was a lack of designated meeting and break spaces for their use.

Limitations

The study followed the patients as they transitioned through the three facilities, which created a problem for the participants to be able to distinguish among them. Patients and carers could not just focus on the physical environment but kept referring to other aspects of the facility such as nursing care, interaction with other patients, and other organizational issues. In addition, the sample size was relatively small to generalize the findings.



Design Implications

Acute care settings and their interior design do not always meet the needs of older patients, according to the authors. Specific areas that need improvements include designing a homelike interior, providing more storage space, private bathrooms, easy access to the outdoors, safety, and less patient seclusion. There was mention of the aesthetics by the participants at two of the facilities as being pleasant, without further elaboration.

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